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## FAX TRANSMISSION

DATE: March 17, 2009

PTO IDENTIFIER: Application Number 10/593,480-Conf. #2593

Patent Number

Inventor: Kwang-Jin LEE et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: BIRCH, STEWART, KOLASCH &amp; BIRCH, LLP

Jun S. Ha

PHONE: (703) 205-8000

Attorney Dkt. #: 5706-0103PUS1

PAGES (Including Cover Sheet): 12

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BIRCH, STEWART, KOLASCH &amp; BIRCH, LLP

8110 Gatehouse Road, Suite 100 East, P.O. Box 747, Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 Facsimile: (703) 205-8050

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PTO/SB/97 (08-04)

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Application No. (if known): 10/593,480

Attorney Docket No.: 5706-0103PUS1

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| AMENDMENT TRANSMITTAL LETTER  |   |   |   | Docket No.<br>5708-0103PUS1 |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
|---|---|---|---|-----------------------------|------|-------------------|--|--|--|--|--|--|---|---|-----------------------------------|------|--|--------------|----|--------|---|---------|------|-----------------------|---|-------|---|----------|------|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|--|--|--|--|--|------|
| Application No.<br>10/593,480-Conf. #2593   |   | Filing Date<br>September 20, 2006       |   | Examiner<br>K. M. Zalasky   |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Art Unit<br>1797  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Applicant(s): Kwang-Jin LEE et al.  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Invention: SUBMERGED HOLLOW FIBER MEMBRANE MODULE   |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| <b>MS Amendment</b><br><b>Commissioner for Patents</b><br><b>P.O. Box 1450</b><br><b>Alexandria, VA 22313-1450</b>  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Transmitted herewith is an amendment in the above-identified application.   |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| The fee has been calculated and is transmitted as shown below.  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| <table border="1"> <thead> <tr> <th colspan="6">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims<br/>Remaining<br/>After<br/>Amendment</th> <th>Highest<br/>Number<br/>Previously<br/>Paid</th> <th>Number<br/>Extra Claims<br/>Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>13</td> <td>- 20 =</td> <td>0</td> <td>x 52.00</td> <td>0.00</td> </tr> <tr> <td>Independent<br/>Claims</td> <td>1</td> <td>- 3 =</td> <td>0</td> <td>x 220.00</td> <td>0.00</td> </tr> <tr> <td colspan="6">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="6">Other fee (please specify):</td> </tr> <tr> <td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td>0.00</td> </tr> </tbody> </table>  |   |   |   |                             |      | CLAIMS AS AMENDED |  |  |  |  |  |  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate |  | Total Claims | 13 | - 20 = | 0 | x 52.00 | 0.00 | Independent<br>Claims | 1 | - 3 = | 0 | x 220.00 | 0.00 | Multiple Dependent Claims (check if applicable) <input type="checkbox"/> |  |  |  |  |  | Other fee (please specify): |  |  |  |  |  | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: |  |  |  |  | 0.00 |
| CLAIMS AS AMENDED   |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present   | Rate                        |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Total Claims  | 13  | - 20 =                                  | 0   | x 52.00                     | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Independent<br>Claims   | 1   | - 3 =                                   | 0   | x 220.00                    | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| Other fee (please specify):   |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:  |   |   |   |                             | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| <input checked="" type="checkbox"/> Large Entity<br><input checked="" type="checkbox"/> No additional fee is required for this amendment.<br><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____<br>A duplicate copy of this sheet is enclosed.<br><input type="checkbox"/> A check in the amount of \$ _____ is enclosed.<br><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u><br>as described below. A duplicate copy of this sheet is enclosed.<br><input checked="" type="checkbox"/> Credit any overpayment.<br><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. |   |   | <input type="checkbox"/> Small Entity<br><br>Dated: <u>March 17, 2009</u> |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |
| James T. Eller, Jr.<br>Attorney Reg. No.: 39,538<br>BIRCH, STEWART, KOLASCH & BIRCH, LLP<br>8110 Gatehouse Road<br>Suite 100 East<br>P.O. Box 747<br>Falls Church, Virginia 22040-0747<br>(703) 205-8000  |   |   |   |                             |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |    |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |  |      |

Birch, Stewart, Kolasch &amp; Birch, LLP

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Docket No.: 5706-0103PUS1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Kwang-Jin LEE et al.

Application No.: 10/593,480

Filed: September 20, 2006

For: SUBMERGED HOLLOW FIBER MEMBRANE  
MODULE

Confirmation No.: 2593

Art Unit: 1797

Examiner: K. M. Zalasky

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Madam:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated December 17, 2008, please amend the above-identified U.S. patent application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

Birch, Stewart, Kolasch & Birch, LLP

JTE/JSH/jmc